

06/24/2003

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.: S-100,593

First Inventor or Application Identifier: Torsten A. Staab

Title: HANDHELD APPARATUS FOR AUTOMATED MULTIPURPOSE SAMPLE
COLLECTION AND REGISTRATION

Express Mail Label No.: ER311841398US

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
PO Box 1450
Alexandria, VA 22313-1450

1. ☒ * Fee Transmittal Form (e.g. PTO/SB/17)
(submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages: 16]
☒ Descriptive title of the Invention
☐ Cross References to Related Applications
☒ Statement Regarding Fed sponsored R&D
☐ Reference to sequence listing, a table
or a computer program listing appendix
☒ Background of the Invention
☒ Brief Description of the Drawings (if filed)
☒ Detailed Description
☒ Claim(s)
☒ Abstract of the Disclosure
4. ☒ Drawings(s) (35 U.S.C. 113) [Total Sheets: 6]
☒ Formal ☐ Informal
5. ☒ Declaration & Power of Attorney
[Total Pages: 2]
a. ☒ Newly executed (original or copy)
b. ☐ Copy from a prior application (37 C.F.R. § 63(d)
(for continuation/divisional with Box 16 completed)
c. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).

6. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. ☐ Computer Readable Copy
b. Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies): or
ii. ☐ paper
c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. ☒ Assignment Papers (cover sheet & documentation)
9. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of
(when there is an assignee) Attorney
10. ☒ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PTO-1449 Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(should be specifically itemized)
13. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. ☐ Nonpublication Request and Certification Under 35 U.S.C.
122(b)(2)(b)(i)
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application S.N. S-100,593.

Prior application information: Examiner: Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

16. CORRESPONDENCE ADDRESS

☒ Customer Number 35068 OR ☐ Correspondence Address Below

35068

(Insert Customer No. or Attach Bar Code Label here)

Name: Mark N. Fitzgerald
Address: Los Alamos National Laboratory, LC/IP, MS A187
City: Los Alamos State: New Mexico Zip Code: 87545
Country: Unit d States Telephone: (505) 665-5187 Fax: (505) 665-4424

Name: Mark N. Fitzgerald Registration No.: 48,300

Signature:  Date: 11/24/03

22154 U.S. PTO
10/720955



FEE TRANSMITTAL For FY 2004

Patent fees are subject to annual revision
(submit an original and a duplicate for fee processing)

Complete if Known

Application Number:	
Filing Date:	
First Named Inventor:	Torsten A. Staab
Examiner Name:	
Group/Art Unit:	
Attorney Docket No.:	S-100,593

METHOD OF PAYMENT

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:
Deposit Account Number: **12-2150**
Deposit Account Name: Los Alamos National Laboratory
- ☒ Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17
- ☒ Applicant claims small entity status.
See 37 CFR 1.27

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee	Fee	Fee Description	Fee Paid
\$770	\$385	Utility filing fee	385.00
\$770	\$385	Reissue filing fee	
\$160	\$80	Provisional filing fee	

SUBTOTAL (1) \$385.00

2. EXTRA CLAIM FEES

			Extra Claims	Fee from Fee Paid Below	
Total Claims	24	-20** =	4 X	9	= 36.00
Independent Claims	3	-3** =	0 X	0	= 0
Multiple Dependent					=

** or number previously paid, if greater; For Reissues, see below

Large Entity Fee	Small Entity Fee	Fee Description
\$18	\$9	Claims in excess of 20
\$86	\$43	Independent claims in excess of 3
\$290	\$145	Multiple dependent claim, if not paid.
\$86	\$43	** Reissue independent claims over original patent
\$18	\$9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$36

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$130	\$65	Surcharge - late filing fee or oath	
\$50	\$25	Surcharge - late provisional filing fee or cover sheet	
\$2,520	\$2,520	For filing a request for reexamination	
\$110	\$55	Extension for reply within first month	
\$420	\$210	Extension for reply within second month	
\$950	\$475	Extension for reply within third month	
\$1,480	\$740	Extension for reply within fourth month	
\$2,010	\$1,005	Extension for reply within fifth month	
\$330	\$165	Notice of Appeal	
\$330	\$165	Filing a brief in support of an appeal	
\$290	\$145	Request for oral hearing	
\$110	\$55	Petition to revive - unavoidable	
\$110	\$55	Terminal Disclaimer	
\$1,330	\$665	Petition to revive - unintentional	
\$130	\$130	Petitions to the Commissioner	
\$50	\$50	Petitions related to provisional applications	
\$180	\$180	Submission of Information Disclosure Statement	
\$770	\$385	Filing a submission after final rejection (37 CFR 1.129 (a))	
\$770	\$385	For each additional invention to be examined (37 CFR 1.129(b))	
\$100	\$100	Certificate of Correction	
\$300	\$300	Publication fee for early, voluntary, or normal publication	
\$770	\$385	Request for Continued Examination (RCE)	

Other fee (specify) _____

SUBTOTAL (3) \$0

Reduced by Basic Filing Fee Paid

SUBTOTAL FROM 1	\$385
SUBTOTAL FROM 2	\$36
SUBTOTAL FROM 3	\$0
TOTAL AMOUNT OF PAYMENT	\$421

SUBMITTED BY

Complete (if applicable)

Printed Name: Mark N. Fitzgerald

Signature: 

Date: 11/24/03

Reg. No. 48,300

Telephone (505) 665-5187